MTS2024-0024 AUG 0 5 1997 REF: 840 CERTIFIED MAIL 51195421 NOTIFY SENDER OF NEW ADDRESS RETURN RECEIPT REQUESTED 999 1ETH 57 500 Mr. Raymond Reede ENUER Murphy 011 USA, Inc. P. O. Box 547 Poplar, Montana 59255 Re: Plugging and Abandonment SWD Well No. 29-D East Poplar Unit Roosevelt County, Montana Dear Mr. Reede: Your proposed plan for plugging and abandoning Salt Water Disposal Well Number 29-D in the East Poplar Unit is hereby approved. This abandonment must be completed within 60 days of the date of this approval letter. Please notify Jim Boyter in our Montana Office in Helena at 449-5486 at least two weeks prior to your proposed plugging date so that he might arrange to have an inspector witness the work. Please also be reminded that in a letter dated January 2, 1987, Murphy 011 was allowed to delay the plugging and abandonment of the Mule Creek Allotted 1-D salt water disposal well in the Northeast Benrud Field until July. Since July has almost drawn to a close, this well needs to be plugged and abandoned RESTRICTED DELIVERY on the front of the immediately. Enclosed is a copy of our Plugging Record. Please complete this form for each well and return it to the Environmental Protection Agency within 60 days of the plugging and abandonment of a well. If you have any additional questions, please contact Mr. Boyter in our Helena Office. SECULARIES TANOULD GELDETES ANY ROLL SECULARIES TEDS SEALS STUDENT OF STATE OF STATE STATE OF ST Original signed by Jack W. Hoffbuhr Max H. Dodson Director Water Management Division Enclosure ENGLE: fa/7/28/87/4090 (1)

P 168 880 804

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

Street and Mr. Raymond River Murphy 0il US/ Street and Mr. Box 547 P.O., State and ZIP Code Poplar, MT 59 Postage	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	s
Postmark or Date	

PS Form 3811, July 1983	Put your address in the "RET reverse side. Failure to do this being returned to you. The re you the name of the person delivery. For additional fees t available. Consult postmaster for service(s) requested.	URN TO" space on the swill prevent this card from turn receipt fee will provide elivered to and the date of the following services are					
983 447-848	Show to whom, date and address of delivery. Restricted Delivery.						
345	Article Addressed to: Mr. Raymond Reed Murphy Oil USA, P.O. Box 547 Poplar, MT 5925	Inc.					
トゥークト	4. Type of Service: Registered Insured Certified COD Express Mail	P168 880 804 EPA 738					
9	Always obtain signature of ad DATE DELIVERED.	dressee <u>or</u> agent and					
DOM	5. Signature & Addressee X ADLON	Bravaid					
DOMESTIC	6. Signature - Agent X	,					
RETURN	7. Date of Delivery 8/11/87						
RN RECEIP	8. Addressee's Address ONL	Y if requested and fee paid)					

-

. .

							AAVDUINO I ÓL	. DC 20460	<u> </u>	gymugá	imental ph	9:50TIGH 1
	CFA			PLU	GGIN	IG A		ANDO	MENT PI	AN_	VEENCA	
Į.	AND ADDRESS OF FA							ADDRESS OF			11 1 3 19	47
	phy Oil US	A, Inc.						hy Oil		ncj	i)[1 () i3	GI
	. Box 547 lar, MT 59	255			200 Peach Street				antana Ges	110 C		
Pop	lar, MT 59	233		STATE	· C	OUNTY	<u></u>			PERMIT	NUMBER	<u> 19. r </u>
	ATE WELL AND OUT			MT		Roc	sevelt					
350	TION PLAT — 640	ACRES		SURFAC	E LOCA	TION D	ESCRIPTION		<u>_</u>			
	<u>, N</u>		_				4 OF SV		on 28	TOWNSHIP	29N RAN	
		1 1 1	ļ	LOCATE	WELL II	OWT M	DIRECTIONS F	ROM NEAREST	LINES OF QUA	ARTER SECTIO	N AND DRILLI	NG UNIT
		1 1 1		Surfac Locati	661	At. from	n (N/S) S L	ne of quarter se	ection			
				and 6				f quarter sectio	n			
–	+		╗		TYP	E OF A	UTHORIZATI	NC] 	WELL AC	CTIVITY	
w		1 1 1 	Ε	☑ Indiv					17 01 45%			
	i i i l	1 1 1		☐ Area	Permit				X. cLSU :: Ø 8rine (•	
							1		☐ Enhan	red Recover		
i		- - - - - - - - - - 	—i	Numbe	r ot We	lls	<u> </u>		☐ Hydrox	carbon Stora	ge	
	<u>i i i l</u>	<u>i i i</u>		- }					0 00000	•		
[_		1 1		İ								
	Ś			Lease !	Name	EPU	j		Well Numb	er 29-D		
	CASIN	G AND TUBING	RECORD	AFTER PLUG	GING			METHOD (OF EMPLACEM	ENT OF CEME	NT PLUGS	
	-			<u>-</u>				The Bala	anca Method		•	İ
SIZE		TO BE PUT IN Y	ÆLL (FT) 1			_ н	OLE SIZE	☐ The Dur	np Bailer Me	thod		_
133/				156.4			17½		-Plug Metho	d		•
95/				996.4	4		12 ½	Other				•
5 3	15.5#		 	3888			8-3/4					
	CEMENTING TO PL	LIC AND ABAND	ON DAT	۸.	PLU	2 #1	PLUG #2	PLUG #3	PLUG #4	PLUG 25	PLUG #6	PLUG #7
Size of	Hole or Pipe in which						9-5/8		7400 #4	7000,83	1.000	1.000
	o Bottom of Tubing or				803		80					
Sacks o	f Cement To Be Used	(gulq fise)			50		25					·
Slurry \	/olume To Be Pumped	(cu. ft.)				.5	28.75	_				
Calcula	ted Top of Plug (ft.)	<u> </u>			803		14				<u> </u>	
	ed Top of Plug (if tagg	ed ft.)									ļ	
	Mr. (Lb./Gal.)										 	
Typa Ca	ment or Other Materi										<u> </u>	<u></u>
	From	T ALL OPEN HO	LE AND/	OH PERFORA	TED IN	EHVAL	S AND INTERV	From	ASING WILL BE	VARIED (IT BE	7 <i>7)</i> To	
	853			887			-	rioin				
-	055				-		-	er e	· · ·	·· · · · · · · · · · · · · · · · · ·		·
	_						 					
	<u> </u>											
Estimat	ed Cost to Plug Wells	*> ~-	n+ ~-	 	- t.7 i	י ון	10 CO+ :	at 803'	and so	ueeze	50 sks	cmt
		"A Ci	nt re	rmation	. wil.	וט ו ^ך דידי	umpa 25	sk pl	ug at t	he sur	face.	
\$]	.0,000.00	7.116) 101	e ma e 101		٠ ي	p &	- J P.	- 5			
												
	_				CE	RTI	CATION					
	I certify und	er the pena	ity of i	aw that I i	have s	erso	nallv exam	ined and a	m familiar	with the i	nformation	,
	submitted in						-					1
	immediately											
	and comple	•		_								1
	the possibili				-		•		5 •		•	
	- 1	, 	,					•				_
NAME	AND OFFICIAL TITLE	Please type or pi	int)	SI	GNATUR	RE	a		<u> </u>	DATE SI	GNED	
Rayn	nond Reede			ا ا	0		~ <i>()</i>	125			0.405	
_	rict Manag	ger		10	ayn	كهربيع	<u>معر کر در</u>	کاکلبرو	 	7/1	10/87	
	m 7520-14 (3.84)				Ü		-					

€EPA

ED STATES ENVIRONMENTAL PROTECTION AGENCY WASHINGTON, DC 20460

MTS 2024-0024

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

	AIVIVOAL DIS
NAME AND ADDRESS,O	F EXISTING PERMITTEE
Murphy Oil	USA, Inc.
200 Peach	Street
El Dorado,	Ar 71730

NAME AND ADDRESS OF SURFACE OWNER
Zimmerman Inc.
P.O. Box 277

Poplar, MT 59255 PERMIT NUMBER STATE COUNTY LOCATE WELL AND OUTLINE UNIT ON MT MT521PE-0024 Roosevelt SECTION PLAT - 640 ACRES SURFACE LOCATION DESCRIPTION 14 SECTION 28 TOWNSHIP 29N RANGE 51E WOF SW WOF SW LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT Surface 660ft. from (N/S) S Line of quarter section and 660ft. from (E/W) W Line of quarter section TYPE OF PERMIT XIndividual ☐ Area X Brine Disposal Ε ☐ Enhanced Recovery Number of Wells __1_ ☐ Hydrocarbon Storage East Poplar Unit Well Number

	INJECTION	PRESSURE	TOTAL VOLUM	E INJECTED	TUBING — CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	BBL	MCF	MINIMUM PSIG	MAXIMUM PSIG	
	NO WATER	DISPOSED OF	DURING YE	AR		Mary 1	
						1	
			1000				
	· ·						
			1000				
	111111111111111111111111111111111111111						
					121111111111111111111111111111111111111	-	
		A TOTAL STATE		me to			

CERTIFICATION

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).

NAME AND OFFICIAL	L TITLE (Please type or print)
Raymond	Reede
District	Superintendent

Raymond Reede

DATE SIGNED

ED	D STATES ENVIRONMENTAL PROTECTI	ON AGENCY
	WASHINGTON, DC 20460	

SEPA ANNUAL DIST	POSAL/INJECTION WELL MONITORING REPORT
NAME AND ADDRESS OF EXISTING PERMITTEE	NAME AND ADDRESS OF SURFACE OWNER
Murphy Oil USA, Inc.	Zimmerman Inc.
200 Peach Street	P O Box 277

El Dorado, Ar_71730

P.O. Box 277 Poplar, MT 59255

LOCATE WELL AND OUTLINE UNIT ON SECTION PLAT — 640 ACRES

				1	4				•
						_			Ì
		⊢— 	 	 		⊢ 	├─ 	⊢ I	ĺ
	•					<u> </u>	_	<u> </u>	ļ
		 	— 				—- 		
w									İ
									١
	—- L								ĺ
					;				

STATE PERMIT NUMBER COUNTY MT MT521PE-0024 Roosevelt SURFACE LOCATION DESCRIPTION WOF SW TOWNSHIP 29N RANGE 51E WOF SW WSECTION 28

LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT

Surface 660 ft. from (N/S) S Line of quarter section and 660ft, from (E/W) W Line of quarter section

TYPE OF PERMIT WELL ACTIVITY

X Brine Disposal ☑ Individua! □ Enhanced Recovery

□ Area Number of Wells _____

☐ Hydrocarbon Storage

Lease Name East Poplar Unit Well Number

TUBING — CASING ANNULUS PRESSURE INJECTION PRESSURE TOTAL VOLUME INJECTED (OPTIONAL MONITORING) MINIMUM PSIG MAXIMUM PSIG MONTH MCF YEAR AVERAGE PSIG MAXIMUM PSIG 8BL DISPOSED OF NO WATER DURING YEAR

CERTIFICATION

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).

SIGNATURE

NAME AND OFFICIA	L TITLE (Please type or print)
Raymond	_

District Superintendent

Raymark Riede

DATE SIGNED

1-9-87

⊕EPA

UNITED STATES ENVIRONMENTAL PROTECTION AGEN WASHINGTON, DC 20460

ANNUAL DISPOSAL/INJECTION WELL MONITORING REPORT

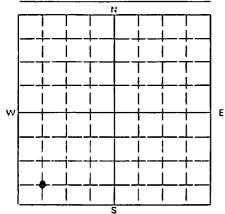
0024

NAME AND ADDRESS OF EXISTING PERMITTEE Murphy Oil USA, Inc. 200 Peach Street El Dorado, AR 71730

NAME AND ADDRESS OF SURFACE OWNER Zimmerman Inc. P.O. Box 277 Poplar, MT 59255

Lease Name East Poplar Unit Well Number 29-D

LOCATE WELL AND OUTLINE UNIT ON SECTION PLAT — 640 ACRES



PERMIT NUMBER STATE COUNTY MTS21PE-0024 MT Roosevelt SURFACE LOCATION DESCRIPTION SW ¼ OF SW W SECTION 28 TOWNSHIP 29N RANGE 51E LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT Surface 660 ft. from (N/S) S Line of quarter section and 660ft. from (E/W) W Line of quarter section WELL ACTIVITY TYPE OF PERMIT Brine Disposal
 Enhanced Recovery ⊠ Individual ☐ Area ☐ Hydrocarbon Storage

		INJECTION	PRESSURE	TOTAL VOLUE	ME INJECTED	TUBING — CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH Y	'EAR	AVERAGE PSIG	MAXIMUM PSIG	88L	MCF	MINIMUM PSIG	MAXIMUM PSIG	
1 - 1	1985	600	600	111,735	0	0	0	
2 - 1	1985	600	610	97,464	0	0	0	
3 - 1	1985	600	600	121,918	0	0	0	
4 - 1	1985	580	580	147,215	0	0	0	
5 - 1	1985	580	580	118,634	0	0	0	
6 - 1	1985	580	580	113,020	0	0	0	
7 - 1	1985	560	560	127,128	0	0	0	
8 - 1	1985	590	590	129,818	0	0	00	
9 - 1	1985	620	650	124,227	0	0	0	
10 - 1	985	620	780	90,868	0	0	0	
11 - 1	1985	.0	00	0	0	0	0	
12 - 1	 1985	0	0	0	0	0	0	

CERTIFICATION

I certify under the penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).

NAME AND OFFICIAL TITLE (Please type or print)	SIGNATURE	DATE SIGNED
Raymond Reede	0 0 0	
District Superintendent	1 aymors & eecle	1-22-86

0024

Casing/Tubing Annulus MTS21PE Pressure Teas T

Name of Company	: Murphy Oil	Corporation	Da	re:	9/21/05				
Name of Well:	ne of Well: #29-D Welch			Permit No.:					
Name of Field_	East Popla	r	Co	unty:	Roosevel	t			
Location of Wel	1:SW 1	/4 SW 1/4 Se	c. 28	T-29N F	R-51 E				
Type of Well:	SWDX	ER	То	tal Depth:	5875	Ft.			
Type of Packer:	Bak	er Model "	ID-1"						
Packer Setting	Depth:	76	56	10.14					
Surface Casing	Size: 13	3/8 Fro	m:O_	Ft. To	1.62	Ft.			
Casing Size:	9 5/8	Fro	m: <u>0</u>	Ft. To	1002	Ft.			
Tubing Size:	2 7/8	Amo	unt:		766	123			
Time of Test:	12:25 PM	Pressure Ga	uge Rea	ding:					
0 Min: 5			Ca	sing lead y Reede	notified.	ssure.			
10									
15		*							
20		-							
25		-							
30									
35		-							
40						٠.			
45					v*				
50									
55									
60 15	ant 1					٠.,			
Jaled ?	Engli	Ins	pected b	y:	ames Rowe	e			

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

WASHINGTON, DC 20460

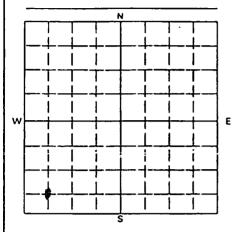
AL/INJECTION WELL MONITO NG REPORT

NAME AND ADDRESS OF EXISTING PERMITTEE

Murphy Oil USA, Inc. P.O. Box 547

Poplar MT 59255

LOCATE WELL AND OUTLINE UNIT ON SECTION PLAT - 640 ACRES



NAME AND ADDRESS OF SURFACE OWNER

Zimmerman Inc.

P.O. Box 277 Poplar, MT 59255

STATE MT Roosevelt MTS21PE-0024

SURFACE LOCATION DESCRIPTION

M OF SW M OF SW M SECTION 28 TOWNSHIP 29N RANGE 51E LOCATE WELL IN TWO DIRECTIONS FROM NEAREST LINES OF QUARTER SECTION AND DRILLING UNIT

Surface Location 660 tt. from (N/S) S Line of guarter section

and 660t, from (E/W) W Line of quarter section TYPE OF PERMIT

WELL ACTIVITY S Brine Disposal D Enhanced Recovery ☐ Hydrocarbon Storage

□ Individual O Area Number of Wells __1

Lease Name East Poplar Unit Well Nu

				** 1
		350	3 1985	
		Rinking i	EGION VIII WATER BRAN	CH
umbi	r 29-	-D		-

INJECTION PRESSURE		PRESSURE	TOTAL VOLUM	NE INJECTED	TUBING — CASING ANNULUS PRESSURE (OPTIONAL MONITORING)		
MONTH YEAR	AVERAGE PSIG	MAXIMUM PSIG	881	MCF	MINIMUM PSIG	MAXIMUM PSIG	
8-84	600	600	44,587		0	0	
9-84	600	600	87,671		0	0	
10-84	600	610	107,181		0	0	
11-84	600	600	104,322		0	0	
12-84	600	600	111,861		0	0	
1-85	600	600	111,735		0	0	
2-85	600	610	97,464		0	0	
3-85	600	600	121,918		0	0	
4-85	580	580	147,215		0	0	
5-85	580	580	118,634		0	0	
6-85	580	580	113,020		0	0	
7-85	560	560	127,128		0	0	

CERTIFICATION

I certify under the penalty of law that I have personally examined and amfamiliar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. (Ref. 40 CFR 144.32).

NAME AND OFFICIAL TITLE (Please type or print) Raymond Reede District Superintendent

Kaymon Reede

DATE SIGNED

8/27/85

Casing/Tubing Annulus Pressure Test



Name of Company: Murphy Oil Corpora	tion	Date:		9/27/85	
Name of Well: #29-D Welch	Permit No.:				
Name of Field East Poplar		County:		Roosevel	.t
Location of Well: SW 1/4 SW 1/4	4 Sec.	28 T-29	N R	-51E	
Type of Well: SWDX		Total D	epth:_	5875	Ft.
Type of Packer: Baker Model	"AD-1	11		- 1011	
Packer Setting Depth:	766				
Surface Casing Size: 13 3/8	From:	0_Ft.	To	162	Ft.
Casing Size: 9 5/8	From:	<u>0</u> Ft.	To	1002	Ft.
Tubing Size: 2 7/8	Amount:		7.6	66	
Time of Test: 12:25 PM Pressur	e Gauge I	Reading:			
		Casing	leak.	otain pre	ssure.
10					
15					
20					
25		, A			
30					
35					
40		e vi			
45					
50					
55					
60 1 Tosto					
Taled Evel	nspected	by:	Jam	es Rowe	_

EBUNDAMENTAL PROTECTION.

OCT 1 1885

MONTALS OFFICE







EPA Compliance Correspondence

Operator Response to Correspondence MT2024-00024 029N 051E 80 Well located: FORT PECK POPLAR EAST, R 29-D MT00024